

J0891 U.S. PTO  
10/13/00

PTO/SB/50 (08-00)

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# REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents  
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Washington, DC 20231

Attorney Docket No. 030681-032  
First Named Inventor Chul-woo Lee  
Original Patent Number 5,822,135  
Original Patent Issue Date (Month/Day/Year) 10-13-98  
Express Mail Label No.

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

## APPLICATION ELEMENTS (37 CFR 1.173)

- ☒ Fee Transmittal Form (PTO/SB 58)  
(Submit an original, and a duplicate for fee processing)
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
- ☒ Drawing(s) (proposed amendments, if appropriate)
- ☐ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
- Original U.S. Patent currently assigned?  
☒ Yes ☐ No  
(If Yes, check applicable box(es))  
☐ Written Consent of all Assignees (PTO/SB/53)  
☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney (PTO/SB/96)

## ACCOMPANYING APPLICATION PARTS

- ☒ Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).
- ☐ Original U.S. Patent for surrender  
☐ Ribboned Original Patent Grant  
☐ Statement of Loss (PTO/SB/55)
- ☐ Foreign Priority Claim (35 U.S.C. 119) (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ English Translation of Reissue Oath/Declaration (if applicable)
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- Other: .....

## 15. CORRESPONDENCE



Customer Number or Bar Code Label

21639

or ☐ Correspondence address below

Name Charles F. Wieland III PATENT TRADEMARK OFFICE  
Burns, Doane, Swecker & Mathis, L.L.P.  
P.O. Box 1404  
Address Alexandria State VA Zip Code 22131-1404  
City U.S.A. Telephone 703, 836-6620 Fax 703, 836-2021  
Country

NAME (Print/Type)

Charles F. Wieland III

Registration No. (Attorney/Agent)

33,096


Date

10/13/00

Signature

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 030681-032	
Claims as Filed - Part 1							
Claims in Patent		Number Filed in Reissue Application		(3) Number Extra		Small Entity Rate Fee	
(A) 26	Total Claims (37 CFR 1.160)	(B) 40	.... 14 =	x \$	=	or	Rate Fee
(C) 1.	Independent claims (37 CFR 1.160)	(D) 6	• 5 =	x \$	=		x \$ 18. = \$ 252.00
Basic Fee (37 CFR 1.16(h)) \$							x \$ 80. = \$ 400.00
Total Filing Fee \$							\$ 710.00
						OR	\$ 1,362.00
Claims as Amended - Part 2							
(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For		(3) Extra Claims Present		Small Entity Rate Fee	
Total Claims (37 CFR 1.160)	***	MINUS	**	=	x \$	=	x \$ =
Independent Claims (37 CFR 1.160)	***	MINUS	****	=	x \$	=	x \$ =
Total Additional Fee \$						OR	\$
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 02-4800.</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 1,362.00 to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>10/13/00 Date</p> <p> Signature of Applicant, Attorney or Agent of Record</p> <p>Charles F. Wieland III Typed or printed name</p> <p>(Reg. No. 33,096)</p>							

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